Mental health among children and adolescents

1868. SHRI SHAHID SIDDIQUI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the estimated percentage of children in the country suffering from problems of mental health;

(b) how much money has been allocated for mental health care for children and adolescents; and

(c) what programmes his Ministry is running for awareness about mentally challenged persons or for those suffering from other mental problems?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) The data relating to the percentage of children suffering from problems of mental health is not centrally maintained. However, as per Census of India 2001, the number of children in the age group 0-14 years suffering from mental disabilities was 5, 34, 818.

(b) and (c) Restrategised National Mental Health Programme is a major initiative by the Central Government in the field of Mental Health. The main components of the programme are:

1. District Mental Health Programme.
2. Strengthening of Psychiatric wings of Medical Colleges.
3. Upgradation of Mental Hospitals.
4. IEC.
5. Research & Training.

A sum of Rs. 139 crores has been allocated for National Mental Health Programme during 10th Five Year Plan. The programme covers all groups including children and adolescents.

Migration of doctors

1869. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the present medical education in the country is oriented towards individual career, aspirations of the students from privileged background rather than public health needs of the country;

(b) whether out of around 42,000 doctors employed in Government hospitals/agencies, only 31,400 doctors are serving in rural primary and community health centres to cover 72 per cent of India's population in rural areas;

(c) whether the National Commission on Macroeconomics and Health (2005) has estimated that almost 50 per cent of graduates from AIIMS have migrated overseas; and

(d) whether Government would mandate every passing out medical graduate to serve a fixed period in rural areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) It is a fact that the National Commission on Macroeconomics and Health (2005) in its report has indicated that 50 percent of students AIIMS have migrated-both external (from India to other countries) and internal (from the public sector).

Revision and updation of medical curriculum to meet the changing public health needs of the country is an ongoing process. While specific data is not centrally maintained, adequate number of doctors are not available in the rural areas *vis a vis* urban areas. In order to tackle this problem, the Government constituted a Task Force on Medical Education for the National Rural Health Mission under the Chairmanship of Ex-Union Health Secretary. The task force has since submitted its report, which is under examination.

Understanding with insurance companies

1870. SHRI TARIQ ANWAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that public sector insurance companies and hospitals have come to an understanding on pricing of health care services for which insurance covers are being provided; and

(b) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) There is no understanding between the public sector insurance companies and the hospitals on pricing of health care services for which insurance covers are being provided.

Increasing medical seats

1871. SHRI T.R. ZELIANG: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Governments have a proposal to increase MBBS/BDS seats